Ohio Campaign Finance Report 19 7411 55

Prescribed by Secretary of State 3/05 Full Name of Committee **Groce for Columbus Schools** Full Name of Candidate Stephanie A Groce Street Address Office Sought 4985 Denbigh Court **Board of Education** Co<u>lumbus</u> Zıp Code Columbus 43220 OH Annual Year Type of Report Pre Primary Post Primary Pre-General Post-General (place X to the left of report July August September Semiannual X type) Monthly Monthly Monthly Termination Amended Report? Report Electronically filed? ✓ No ☐ Yes ☐ Yes ✓ No Date of Election 07 06 11

For candidates only during an election year if total contributions and expenditures each total \$500 or less during the combined pre- and post periods at one election, check box. No other forms are required at a post primary or post general period, if above statement applies. See R.C. 3517 10(H) for details

	In .
l Amount brought forward from last report	\$ 512 <i>7</i> 0
2 Total monetary contributions (From Form No 31 A)	\$ 0.00
3 Total other income (From Form No 31 A 2)	\$
	\$
4 Total funds available (sum of lines 1 2 3)	\$ 512.70
5 Total monetary expenditures (From Form No 31 B)	0 00
6 Balance on hand (line 4 minus line 5)	\$ 512 <i>7</i> 0
7 Value of m-kind contributions received (From Form No 31 J 1)	\$ 0.00
8 Value of m kmd contributions made (From Form No 31 J 2)	\$ 0.00
9 Outstanding loans owed by committee (From Form No 31 C)	\$ 5,000 00
10 Outstanding debts owed by committee (From Form No 31 N)	\$ 8,325 00
11 Outstanding loans owed to committee (From Form No 31 K)	\$ 0.00
12 Value of independent expenditures made (From Form No 31 U)	\$ 0.00
13 For Electronic Filing Entities only Sum of lines 2 7 and amount of any new loans received this period	\$

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION WHOEVER									
SHOVE NICHALF, Treasurer									
Print Name and Title (Treasurer and Deputy	Treasurer only) Signature		Date						
Contribution	Expenditure	Other	Total						
pages0	pages0	pages 2-0	pages 3 e						

3	1-	C	
R	C	3517	10

Page_		

Statement of Loans Received

Prescribed by Secretary of State3/05

									y SCU					_					
Full Name of Committee		_				-													
Groce for Columbus S	cho	<u>ols</u>										<u> </u>							
From Whom Received							•						Ē	пог	Amo				Amt Incurred this Period
Steve Niehoff																5,0	<u>00</u>	<u>00</u>	0 00
Address				-															Outstanding Balance
4985 Denbigh Court																			5,000 00
City	State		ap Cod			Los			ed Tl	hıs P	errod		ı					Payn	ents This Period
Columbus	DH	4	1322		_			ate				Amount	_			Dat			Amount
Date Loan was originally Incurred	м 06	2	D 25	9 07	М		D		Y		\$		0	М	ı	D		Y	s 0
Registration Number of PAC					М		D		Y				1	М		D	Γ	Y	
Employer/Occupation/Labor Organization*					М		D		Y				7	M	7	D	1	Y	
Product Director						1			ı							1	1		
From Whom Received													I	nor.	Amo	unt	•	•	Amt Incurred this Period
Address												· · · · · · · · · · · · · · · · · · ·	4						Outstanding Balance
Addition													ļ						Oustaining Dalaice
City	State	Z	Ip Cod	е		Los		ecerv ate	ed Ti	hış P	ernod	Amount	Pays Date					Payn	nents This Period Amount
Date Loan was originally	М	T	D	Y	М		D		Y		\$		T	M	T	D	Т	Ý	\$
Incorred																	L		
Registration Number if PAC					M		D		Y					М		D		Y	
Employer/Occupation/Labor Organization*				•	М		D		Y				1	М		D	Γ	Y	
From Whom Received		•											Ĭ	TIOT .	Amo	unt	•	l _.	Amt Incurred this Period
Address													1						Outstanding Balance
City	State	; Z	ap Cod	e	Π	Los		eceiv	ed TI	hıs P	ernod	Amount	Ī			Dat		Payn	nents This Period Amount
Defe Lorn was originally	м	╅	D	ΙΥ	м		T D		Y		s		+	М	Т	D		Ý	İs
Incurred									j									1	
Registration Number if PAC					М		D		Y				1	М		D 		Y	
Employer/Occupation/Labor Organization*				М		D		Y				1	М	1	D	T	Y		
* Required for contributions over \$100 to st if any rather than employer should be listed the employees are members if any must ap	l If two	om	ore em	ployees d	•														

If a loan is forgiven, write	"Forgiven in the	Outstanding Balance sp	ice Transfer total of all	loans received this pen	od to the Statement of Oti	her income (Form No	31 A 2
Transfer total of all payme	ents made in this pe	eriod to the Statement of I	expenditures (Form No	31 B) Transfer Total (Outstanding Balance to the	cover page (Form No	30 A)

1	Total prior amount \$	5,000 00		
2	Total received this period \$		0 00	(To Form No 31 A 2)
3	Total Payments this Period \$		0 00	(also record on Form 31 B
4	Total Outstanding Balance \$	5,00	0 00	(To Form No 30 A)

3	1-	N	
R	C	3517	10

Page	_

Statement of Outstanding Debts

Prescribed by Secretar	ry of Stat	e 2/01						
Full Name of Committee								
Groce for Columbus Schools								
To Whom Owed				Prior Ai	nount		Amt Incurred this Period	
Steve Niehoff					5,0	00 00	0 00	
Address				Item or I	Purpose fo	r Debt	Outstanding Balance	
4985 Denbigh Court				C	ampa	ıgn	5,000 00	
City Columbus	State DH	Zıp Co. 43	de 3220		Pa Date	yments N	Made This Period Amount	
Date Debt was originally Incurred	м 06	D 25	9 07	М	D	Y	s None	
Registration Number of PAC	1		<u>-1</u>	М	D	Y		
				M	D	Y		
To Whom Owed				Prior Ar	nount		Amt Incurred this Period	
Saperstein Associates, Inc						0 00	3,325 00	
Address				Item or F	urpose fo	r Debt	Outstanding Balance	
4555 North High Street]	Pollun	ıg	3,325 00	
City	State	Zıp Coo	de		Pa	yments N	fade This Period	
Columbus	þн	43	214		Date	•	Amount	
Date Debt was originally Incurred	м 10	D 29	9 07	М	D	Y	s None	
Registration Number of PAC	•			M	D	Y	 	
				M	D	Y		
To Whom Owed				D-v A-			A and To assume distance Description	
10 Wildin Gwed				Ртюг Ап	aount		Amt Incurred this Period	
Address				Item or P	urpose fo	r Debt	Outstanding Balance	
City	State	Zup Cod	le	Payments Made This Period Date Amount				
Date Debt was originally Incurred	M	D	Y	M	D	Y	\$	
Registration Number if PAC		 -	<u> </u>	М	D	Y		
				M	D	Y	<u></u>	
if a debt is forgiven, write "Forgiven" in the Outstanding Balance" column. Transfer total of all p Total amount forgiven should be included in the In Kind Contributions Received (Form No 31 J-	ayments :	made this fer total o	period to	the States g debt am	ment of 1	Expenditu te cover pa	res (Form No 31 B)	
0.00								

			M	D	Y	
	'm the Outstanding Balance" column. Transfe uded in the In Kind Contributions Received (Fo					
Total Payments this Period \$	0 00	(also record on Form 31 B)				
Total Outstanding Balance \$	8,325 00	(also record on cover page)				7